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PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

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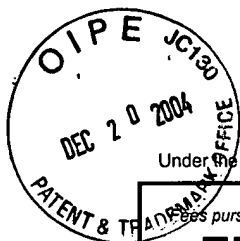
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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	09/323,597	
	Filing Date	June 1, 1999	
	First Named Inventor	Daniel E. H. AFAR	
	Art Unit	1642	
	Examiner Name	G. B. Nickol	
Total Number of Pages in This Submission	21	Attorney Docket Number	511582000800

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form in duplicate (2 pages)	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply (8 pages)	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request (1 page)	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	Declaration of Arthur B. Raitano, Ph.D. Under 37 C.F.R. § 1.132 (4pp declaration, 3pp Exhibit A, 1p Exhibit B, 1p Exhibit C, 9pp total)
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	Return Receipt Postcard
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	Remarks	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	MORRISON & FOERSTER LLP (Customer No. 25226)		
Signature			
Printed name	Robert K. Cerpa		
Date	December 15, 2004	Reg. No.	39,933

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: MS A/F, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.	
Dated: December 15, 2004	Signature:  (Kari A. Cruz)



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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known																																																											
<b>FEE TRANSMITTAL for FY 2005</b>		Application Number	09/323,597																																																										
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	June 1, 1999																																																										
		First Named Inventor	Daniel E. H. AFAR																																																										
		Examiner Name	G. B. Nickol																																																										
TOTAL AMOUNT OF PAYMENT (\$)		225.00	Art Unit	1642																																																									
METHOD OF PAYMENT (check all that apply)		Attorney Docket No.		511582000800																																																									
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____																																																													
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>03-1952</u> Deposit Account Name: <u>Morrison &amp; Foerster LLP</u>																																																													
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)																																																													
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WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.																																																													
<b>FEE CALCULATION</b>																																																													
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>																																																													
<table border="1" style="width: 100%; border-collapse: collapse;"><thead><tr><th rowspan="2">Application Type</th><th colspan="2">FILING FEES</th><th colspan="2">SEARCH FEES</th><th colspan="2">EXAMINATION FEES</th><th rowspan="2">Fees Paid (\$)</th></tr><tr><th>FEE (\$)</th><th>Small Entity Fee (\$)</th><th>Fee (\$)</th><th>Small Entity Fee (\$)</th><th>Fee (\$)</th><th>Small Entity Fee (\$)</th></tr></thead><tbody><tr><td>Utility</td><td>300</td><td>150</td><td>500</td><td>250</td><td>200</td><td>100</td><td></td></tr><tr><td>Design</td><td>200</td><td>100</td><td>100</td><td>50</td><td>130</td><td>65</td><td></td></tr><tr><td>Plant</td><td>200</td><td>100</td><td>300</td><td>150</td><td>160</td><td>80</td><td></td></tr><tr><td>Reissue</td><td>300</td><td>150</td><td>500</td><td>250</td><td>600</td><td>300</td><td></td></tr><tr><td>Provisional</td><td>200</td><td>100</td><td>0</td><td>0</td><td>0</td><td>0</td><td></td></tr></tbody></table>								Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)	FEE (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Utility	300	150	500	250	200	100		Design	200	100	100	50	130	65		Plant	200	100	300	150	160	80		Reissue	300	150	500	250	600	300		Provisional	200	100	0	0	0	0	
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<b>2. EXCESS CLAIM FEES</b>																																																													
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HP + highest number of independent claims paid for, if greater than 3																																																													
<b>3. APPLICATION SIZE FEE</b>																																																													
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or reaction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).																																																													
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<b>4. OTHER FEE(S)</b>																																																													
Non-English Specification, \$130 fee (no small entity discount)																																																													
Other: <u>2 month Petition for Extension of Time (1 page)</u> \$225.00																																																													
SUBMITTED BY																																																													
Signature		Registration No. (Attorney/Agent)		Telephone																																																									
		39,933		650-813-5715																																																									
Name (Print/Type)		Robert K. Cerpa		Date																																																									
				12/15/09																																																									